Debtor 1	Balasubramaniam Jayaram Harid				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	SOUTHERN DISTRICT	OF NEW YORK		
Case number	18-13632				

■ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pa	rt 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	746,035.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	746,035.00
Pa	rt 2: Summarize Your Liabilities		
			liabilities int you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	2,870,989.45
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	1,527,185.61
	Your total liabilities	\$	4,398,175.06
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	7,000.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,535.00
Pa	rt 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other s	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	al, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and	submit this form to

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$	
l '	

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clain	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this info	rmation to identify yo	our case and this filing:		
Debtor 1		iam Jayaram Harid	LastName	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for th	e: SOUTHERN DISTRICT O	F NEW YORK	
Case number	18-13632			■ Check if this is an
				amended filing
Official F	orm 106A/B			
Schedu	le A/B: Pro	perty		12/15
		• •	nce. If an asset fits in more than one category, list the	
think it fits best.	Be as complete and accore space is needed, att	curate as possible. If two married	I people are filing together, both are equally responsib On the top of any additional pages, write your name	le for supplying correct
Part 1: Describ	e Each Residence, Build	ding, Land, or Other Real Estate	You Own or Have an Interest In	
1. Do you own o	r have any legal or equit	able interest in any residence, b	uilding, land, or similar property?	
■ No. Go to P	art 2.			
☐ Yes. Where	e is the property?			
Part 2: Describ	e Your Vehicles			
someone else d	rives. If you lease a ve		icles, whether they are registered or not? Includ le G: Executory Contracts and Unexpired Leases. s	,
■ No				
☐ Yes				
			al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories	
■ No				
☐ Yes				
5 Add the do	lar value of the nortic	on you own for all of your en	tries from Part 2, including any entries for	
			=>	\$0.00
	e Your Personal and He	pusehold Items uitable interest in any of the	following items?	Current value of the
			Tollowing Items :	portion you own? Do not deduct secured claims or exemptions.
	goods and furnishing ⁄lajor appliances, furnit	s ure, linens, china, kitchenware		
■ No				
☐ Yes. Des	cribe			
·		audio, video, stereo, and digita ameras, media players, games	al equipment; computers, printers, scanners; music s	collections; electronic devices
□ No				
Yes. Des	cribe			

Debtor 1	Balasubrama	aniam Jayaram Harid	Case number (if known)	18-13632
		2018 Dell Laptop		\$500.00
		2010 Dell Euptop		
	tibles of value	figurings; pointings, prints, or other artwork; books, pictures	s or other art objects; stamp, soin	or baseball card collections:
Examp		figurines; paintings, prints, or other artwork; books, pictures ons, memorabilia, collectibles	s, or other art objects, stamp, com	, or paseball card collections,
■ No		no, momorabilia, concentrac		
	. Describe			
□ 163	. Describe			
	nent for sports an			
Examp	<i>oles:</i> Sports, photog musical instru	graphic, exercise, and other hobby equipment; bicycles, po	ol tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
■ No	musicai msiru	intents		
	D 11			
⊔ Yes	. Describe			
10. Fireaı	rms			
Exan	nples: Pistols, rifles	, shotguns, ammunition, and related equipment		
■ No				
☐ Yes	. Describe			
11. Cloth		othes, furs, leather coats, designer wear, shoes, accessorie	ne.	
□ No	ipies. Everyday Go	niles, luis, leatilei coats, designei wear, shoes, accessorie	:5	
	. Describe			
- res	. Describe			
		Debtor's used clothing		\$2,000.00
		Doctor o docu dictiming		<u> </u>
□ No ■ Yes	. Describe			
		Gold chain with religious pendant		\$1,000.00
	arm animals oples: Dogs, cats, b	airda haraga		
■ No	ipies. Dogs, cats, t	olius, noises		
_	Dogoribo			
□ res	. Describe			
14. Any o	ther personal and	d household items you did not already list, including ar	ny health aids you did not list	
■ No				
☐ Yes	. Give specific info	ormation		
15 Add	the dollar value o	of all of your entries from Part 3, including any entries f	for pages you have attached	
		number here		\$3,500.00
2.44		A.I.A		
	escribe Your Finance			Command value of the
Do you o	wn or nave any le	egal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash				
	nples. Monev vou h	nave in your wallet, in your home, in a safe deposit box, and	d on hand when you file vour petit	ion
□ No	,	, , , ,, 2 out 2 op 50.1 20n, and	,	
	:			
103				
			Cash	\$100.00

	f money Checking, savings, or other financial acco institutions. If you have multiple accounts			okerage house	es, and other similar
■ No □ Yes		Institution name:			
Examples:	tual funds, or publicly traded stocks Bond funds, investment accounts with bro	okerage firms, money market acc	ounts		
■ No □ Yes	Institution or issuer	name:			
joint vento □ No			inesses, including ar	n interest in a	ın LLC, partnership, and
■ Yes. Giv	e specific information about them Name of entity:		% of ownersh	ip:	
	Total Nutrition Fran	chising LLC	90.1	%	\$0.00
	Danbury Pharma LI	.c	100	%	\$0.00
	Total Nutritional Ho	ldings, LLC	100	%	\$0.00
	Total Nutrition Reta	il LLC	100	%	\$0.00
	SNILLC		100	%	\$0.00
	The SAI Household	LLC	100	%	\$0.00
	Mistaire L.L.C.		100	%	\$0.00
Negotiable Non-negot ■ No	nt and corporate bonds and other nego instruments include personal checks, cas iable instruments are those you cannot tra- e specific information about them Issuer name:	hiers' checks, promissory notes,	and money orders.		
	or pension accounts Interests in IRA, ERISA, Keogh, 401(k), 4	03(b), thrift savings accounts, or	other pension or profit	-sharing plans	3
	each account separately. Type of account:	Institution name:			
Your share	eposits and prepayments of all unused deposits you have made so Agreements with landlords, prepaid rent,	that you may continue service o public utilities (electric, gas, wate	r use from a company r), telecommunications	s companies,	or others
Yes		Institution name or individ	ual:		
	loan collateral	Bibby International T Bibby Financial Servi			\$670,000.00
■ No	A contract for a periodic payment of mone	ey to you, either for life or for a nu	mber of years)		
☐ Yes	Issuer name and description.				

Case number (if known) 18-13632

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1

Balasubramaniam Jayaram Harid

De	ebtor 1	Balasubramaniam Jayaram	Harid	C	ase number (if known)	18-13632
24.	26 U.S.C	s in an education IRA, in an acc C. §§ 530(b)(1), 529A(b), and 529(ount in a qualified ABLE program, o b)(1).	r under a qual	ified state tuition prog	gram.
	■ No □ Yes	Institution name and	d description. Separately file the record	s of any interes	sts.11 U.S.C. § 521(c):	
25.	Trusts,	equitable or future interests in	property (other than anything listed	in line 1), and	rights or powers exer	cisable for your benefit
	☐ Yes.	Give specific information about the	em			
26.	Example ■ No	les: Internet domain names, webs	secrets, and other intellectual prope ites, proceeds from royalties and licens		s	
	☐ Yes.	Give specific information about the	em			
27.	Example ■ No		enses, cooperative association holding	s, liquor license	es, professional license	s
	☐ Yes.	Give specific information about the	em			
M	oney or p	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.		unds owed to you				·
	□ No ■ Yes (Give specific information about the	em, including whether you already filed	the returns and	the tax vears	
	_ 100.0	Sive specific information about the	mi, molading whomer you directly mod	ino rotarno ant	a the tax years	
			Debtor's 50% interest in 2017 ta	x refund	Federal	\$70,307.00
29.	■ No		/, spousal support, child support, maint	enance, divorc	e settlement, property s	settlement
30.		mounts someone owes you les: Unpaid wages, disability insur benefits; unpaid loans you ma	ance payments, disability benefits, sick de to someone else	pay, vacation	pay, workers' compen	sation, Social Security
		Give specific information				
31.		s in insurance policies les: Health, disability, or life insura	nce; health savings account (HSA); cre	edit, homeowne	er's, or renter's insurand	ce
	■ Yes. N	Name the insurance company of e Company na	, ,	Beneficiary	<i>y</i> :	Surrender or refund value:
		AXA Equit	able			\$2,128.00
32.	If you a	erest in property that is due you re the beneficiary of a living trust, ne has died.	from someone who has died expect proceeds from a life insurance	policy, or are c	urrently entitled to rece	ive property because
	■ No □ Yes.	Give specific information				
33.			r not you have filed a lawsuit or mac les, insurance claims, or rights to sue	le a demand fo	or payment	
	■ No		, ,			

Deb	otor 1	Balasubramaniam Jayaram Harid		Case number (if known)	18-13632	
] Yes.	Describe each claim				
34.	Other o	contingent and unliquidated claims of every nature, inclu	iding counterclaims	of the debtor and rights to	set off claims	
	■ No	D				
		Describe each claim				
	Any fin I _{No}	ancial assets you did not already list				
		Give specific information				
36.		he dollar value of all of your entries from Part 4, includin			\$742,535.00	
Part	Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.					
	37. Do you own or have any legal or equitable interest in any business-related property?					
	No. Go to Part 6.					
	Yes. C	Go to line 38.				
Part	lf y	scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.		
46.	Do you	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?		
	No.	Go to Part 7.				
	☐ Yes	. Go to line 47.				
Part	7:	Describe All Property You Own or Have an Interest in That You	u Did Not List Above			
53.		have other property of any kind you did not already list	?			
	■ No	, ,				
	☐ Yes.	Give specific information				
54.	Add t	he dollar value of all of your entries from Part 7. Write th	at number here		\$0.00	
Part	8:	List the Totals of Each Part of this Form				
55.	Part 1	I: Total real estate, line 2			\$0.00	
56.	Part 2	2: Total vehicles, line 5	\$0.00			
57.	Part 3	3: Total personal and household items, line 15	\$3,500.00			
58.	Part 4	1: Total financial assets, line 36	\$742,535.00			
59.	Part 5	5: Total business-related property, line 45	\$0.00			
60.		S: Total farm- and fishing-related property, line 52	\$0.00			
61.	Part 7	7: Total other property not listed, line 54 +	\$0.00			
62.	Total	personal property. Add lines 56 through 61	\$746,035.00	Copy personal property to	stal \$746,035.00	
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$746,035.00	

Debtor 1	Balasubramaniam Jayaram Harid					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF NEW YORK			
Case number	18-13632					

Check if this is an amended filing

Official Form 106C

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.						
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)						
	You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	2018 Dell Laptop Line from Schedule A/B: 7.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(6)		
	Line Irom Schedule AVB. 7.1			100% of fair market value, up to any applicable statutory limit			
	Debtor's used clothing Line from Schedule A/B: 11.1	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)		
	Lille Hotti Schedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit			
	Gold chain with religious pendant Line from Schedule A/B: 12.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(4)		
	Life from Schedule AVB. 12.1			100% of fair market value, up to any applicable statutory limit			
	Federal: Debtor's 50% interest in 2017 tax refund	\$70,307.00		\$13,100.00	11 U.S.C. § 522(d)(5)		
	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit			

AXA Equitable

Line from Schedule A/B: 31.1

\$2,128.00

11 U.S.C. § 522(d)(7)

\$1,350.00

100% of fair market value, up to any applicable statutory limit

Del	otor 1	Balasubramaniam Jayaram Harid	Case number (if known)	18-13632
3.	•	ou claiming a homestead exemption of more than \$160,375? ect to adjustment on 4/01/19 and every 3 years after that for cases filed on c	or after the date of adjustment.)	
		No		
		Yes. Did you acquire the property covered by the exemption within 1,215 da	ys before you filed this case?	
	I	□ No		
	I	Yes		

Fill in this informati	on to identify yo	ur case:				
	First Name	am Jayaram Harid Middle Name	Last Name		-	
Debtor 2		Meddle News	LastNama			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankru	uptcy Court for the	SOUTHERN DISTRICT OF NE	EW YORK		-	
Case number 18-4	13632					
(if known)					■ Check	if this is an
					amend	ded filing
Official Form 1	06D					
		s Who Have Claims	Secured	by Propert	У	12/15
		If two married people are filing togeth out, number the entries, and attach it				
1. Do any creditors hav	ve claims secured b	v vour property?				
		this form to the court with your other	r schedules. You	u have nothing else t	o report on this form.	
_	of the information	•		3		
	ecured Claims					
		more than one secured claim, list the cre	editor separately	Column A	Column B	Column C
for each claim. If more	than one creditor ha	s a particular claim, list the other creditor ical order according to the creditor's nam	s in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Ribby Int'l Tr	rada Einanaa	.		\$2 970 090 <i>45</i>	\$670,000.00	\$2,200,989.4
Bibby Int'l Tr	aue rinance	Describe the property that secures loan collateral: Bibby Interi		\$2,870,989.45	\$670,000.00	5
		Trade Finance n/k/a Bibby F Services, Inc.), a finance				
600 TownPai Suite 450	rk Lane	As of the date you file, the claim is:	Check all that			
Kennesaw, G	SA 30144	apply. Contingent				
Number, Street, City	, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as car loan)	mortgage or secu	ıred		
Debtor 2 only	. 0		-h:-!!:\			
☐ Debtor 1 and Debtor☐ At least one of the d	•	☐ Statutory lien (such as tax lien, me☐ Judgment lien from a lawsuit	ecnanic's lien)			
☐ Check if this claim		Other (including a right to offset)	possessory	lien		
community debt			•			
Date debt was incurre	d 8/2/16	Last 4 digits of account num	ber			
Add the dollar value	of your entries in C	Column A on this page. Write that num	ber here:	\$2,870,98	39.45	
If this is the last pag	e of your form, add	the dollar value totals from all pages		\$2,870,98		
Write that number he	ere:			V =,010,00	<u></u>	
Part 2: List Others	to Be Notified fo	or a Debt That You Already Listed	l			
trying to collect from y	you for a debt you o any of the debts tha	ne notified about your bankruptcy for owe to someone else, list the creditor at you listed in Part 1, list the addition this page.	in Part 1, and the	en list the collection a	gency here. Similarly, if	you have more
Name, Number,	Street, City, State &	Zip Code	On which	n line in Part 1 did vou e	nter the creditor? 2.1	
Daniel F. Flo				·		
Jasne & Flo 30 Glenn St.			Last 4 diç	gits of account number		
White Plains						

Deptor	Balasubrama	aniam Jayaram Harid		Case number (if known)	18-13632		
	First Name	Middle Name	Last Name				
Ц,	lame, Number, Stree	t, City, State & Zip Code		On which line in Part 1 did you ento	er the creditor? 2.1		
N	AcGuireWoods	LLP		•			
	Atn: Jeffrey J. C	hapman, Esq.		Last 4 digits of account number	_		
1	345 Ave of the	Americas FL 7					
1	New York, NY 10	0105					

Fill in th	is information to identify your	caso.			
	is information to identity your	case.			
Debtor 1	Balasubramanian First Name	n Jayaram Harid Middle Name	Last Name		
Debtor 2		Middle Name	Last Name		
(Spouse if,		Middle Name	Last Name		
United S	tates Bankruptcy Court for the:	SOUTHERN DISTRICT O	F NEW YORK		
Case nul	mber <u>18-13632</u>				Check if this is an amended filing
	Form 106E/F Iule E/F: Creditors W	/ho Have Unsecur	ed Claims		12/15
any execu Schedule Schedule left. Attacl name and	tory contracts or unexpired leases G: Executory Contracts and Unexp D: Creditors Who Have Claims Sec n the Continuation Page to this pag case number (if known).	that could result in a claim. A ired Leases (Official Form 106 ured by Property. If more space je. If you have no information	Also list executory GG). Do not include ce is needed, copy	Part 2 for creditors with NONPRIORITY contracts on Schedule A/B: Property (Ce any creditors with partially secured clatte Part you need, fill it out, number the do not file that Part. On the top of any a	Official Form 106A/B) and on aims that are listed in e entries in the boxes on the
Part 1:					
_	ny creditors have priority unsecure	d claims against you?			
	o. Go to Part 2.				
☐ Ye	es.				
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims			
3. Do ar	ny creditors have nonpriority unsec	cured claims against you?			
□ No	o. You have nothing to report in this p	art. Submit this form to the cour	t with vour other sch	nedules.	
■ Ye			,		
unsed	cured claim, list the creditor separately one creditor holds a particular claim, li	y for each claim. For each claim	listed, identify what	no holds each claim. If a creditor has more type of claim it is. Do not list claims alread n three nonpriority unsecured claims fill ou	ly included in Part 1. If more
1 alt 2					Total claim
4.1	American Express	Last A digits o	f account number		Unknown
	Nonpriority Creditor's Name		i account number		
I	PO Box 297814	When was the	debt incurred?	2016	
	Fort Lauderdale, FL 33329-7				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date	you file, the claim	is: Check all that apply	
		_			
	Debtor 1 only	☐ Contingent			
I	Debtor 2 only	☐ Unliquidate	d		
I	Debtor 1 and Debtor 2 only	☐ Disputed			
I	\square At least one of the debtors and and	Julei	RIORITY unsecure	ed claim:	
I	\square Check if this claim is for a comr	•			
	debt s the claim subject to offset?	☐ Obligations report as priorit		aration agreement or divorce that you did	not
1	No	☐ Debts to pe	nsion or profit-shari	ng plans, and other similar debts	
I	□Yes	■ Other. Spec	Danbury Potherwise	ty of debtor as principal of Pharma LLC, guarantor, or , for unpaid company Amex rd charges	

Debtor	Balasubramaniam Jayaram Harid	Case number (if known) 18-13632	
4.2	Amur Equipment Finance Co. Nonpriority Creditor's Name	Last 4 digits of account number	\$154,624.64
	Atn: Stacie Van Bibber 308 Locust St	When was the debt incurred? 2017	
	Grand Island, NE 68801 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	□ o#	
	Debtor 2 only	☐ Contingent ☐ Unliquidated	
	Debtor 2 only Debtor 1 and Debtor 2 only	☐ Unilquidated ☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	guaranty of machine lease of Total Nutrition Franchise Corp.	
4.3	Bmw Financial Services Nonpriority Creditor's Name	Last 4 digits of account number 8024	\$19,073.00
	Attn: Bankruptcy Department Po Box 3608	When was the debt incurred? Opened 08/18	
	Dublin, OH 43016 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Automobile lease	
4.4	Change Capital Partners I LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$861,275.00
	600 Madison Ave FI 18	When was the debt incurred? 2016	
-	New York, NY 10022 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	guaranty to Azadian Group LLC of liablity of Danbury Pharma LLC, assigned to Change Capital Partners I LLC	

Debtor	Balasubramaniam Jayaram Harid	Case number (if known) 18-13632	
4.5	CITI	Last 4 digits of account number 4192	\$15,000.00
	Nonpriority Creditor's Name P.O. Box 6235 Sioux Falls, SD 57117	When was the debt incurred? 2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Any liability of debtor as principal of Danbury Pharma LLC, guarantor, or otherwise, for unpaid company Citi charge card charges	
4.6	Citicards	Last 4 digits of account number 8664	\$4,803.00
	Nonpriority Creditor's Name Atn: Centralized BK Po Box 790040	When was the debt incurred? 2015 - 2017	
	Saint Louis, MO 63179 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
4.7	De Lange Financial Services Nonpriority Creditor's Name	Last 4 digits of account number 3448	\$63,185.72
	1111 Old Eagle School Rd	When was the debt incurred? 2016	
	Wayne, PA 19087 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	personal guaranty of lease of Danbury Other. Specify Pharma LLC	
		i nama EEO	

Official Form 106 E/F

Debtor	1 Balasubramaniam Jayaram Harid	Case number (if known) 18-13632	
4.8	Ford O'Brien LLP	Last 4 digits of account number	\$19,000.00
	Nonpriority Creditor's Name Atn: Adam Ford, Esq. 575 5th Ave., 17th Fl. New York, NY 10017	When was the debt incurred? 2017 - 2018	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify legal services	
4.9	Marcum LLP Nonpriority Creditor's Name	Last 4 digits of account number	\$7,500.00
	Atn: Monte Singh, CPA 10 Meliville Park Rd Melville, NY 11747	When was the debt incurred? 2017 - 2018	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify accounting services	
4.1	St Johns Place Associates LLC Nonpriority Creditor's Name	Last 4 digits of account number	\$123,274.25
	45 St. John's Place Freeport, NY 11520	When was the debt incurred? 2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	judgment entered 2/16/18 based on lease guaranty (Danbury Pharma LLC lease of premises at 41 & 51 St. John Pl., Freeport, NY 11520)	

Official Form 106 E/F

Debtor	1 Balasubramaniam Jayaram Harid	<u>Cas</u>	se number (if known)	18-13632				
4.1	Stern Family Partnership LP	Last 4 digits of account number		_	\$250,000.00			
	Nonpriority Creditor's Name 330 Old Country Rd Mineola, NY 11501	When was the debt incurred? 2	016					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: C	Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured cla	aim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation report as priority claims	on agreement or divorce	that you did not				
	■ No	\square Debts to pension or profit-sharing pla	ans, and other similar de	ebts				
	☐Yes		n lease guaranty oupled by Danbury					
4.1	Toyota Motor Credit Co	Last 4 digits of account number	1940	_	\$9,450.00			
	Nonpriority Creditor's Name Toyota Financial Services Po Box 8026	When was the debt incurred? 2	016					
	Cedar Rapids, IA 52408 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: C	Check all that apply					
	■ Debtor 1 only	☐ Contingent						
	☐ Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured cla	aim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation report as priority claims						
	No	☐ Debts to pension or profit-sharing pla		ebts				
	Yes	Other. Specify Automobile le	Other. Specify Automobile lease					
is tryii have r notifie	List Others to Be Notified About a Denis page only if you have others to be notified and to collect from you for a debt you owe to somore than one creditor for any of the debts the dot for any debts in Parts 1 or 2, do not fill out and Address	about your bankruptcy, for a debt that you a omeone else, list the original creditor in Par at you listed in Parts 1 or 2, list the addition	rts 1 or 2, then list the one all creditors here. If you	collection agency h	nere. Similarly, if you			
	ican Express Legal		art 1: Creditors with Priori	ity Unsecured Claim	S			
Mail C	esey Street code 01-43-03 York, NY 10285		art 2: Creditors with Nonp					
	101K, W1 10203	Last 4 digits of account number						
Name ar	nd Address	On which entry in Part 1 or Part 2 did you list Line 4.6 of (<i>Check one</i>):	the original creditor? art 1: Creditors with Priori	ity Unsecured Claim	s			
	3ox 6217		art 2: Creditors with Nonp	=				
Sioux	Falls, SD 57117	Last 4 digits of account number	at 2. Oreanors with North	ononly onscouled of	uiiii			
Morga Platze 475 Pa	nd Address an Grossman, Esq er Swergold et al ark Ave So. York, NY 10016	On which entry in Part 1 or Part 2 did you list to Line 4.7 of (Check one):	the original creditor? art 1: Creditors with Priori art 2: Creditors with Nonp	•				
		Last 4 digits of account number						

Name and Address
Nicole J. Coward
Comrie & Coward LLP
148 S Long Beach Ave
Freeport, NY 11520

On which entry in Part 1 or Part 2 did you list the original creditor?

Line <u>4.10</u> of (*Check one*): □ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
nom rait i	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	
				· -	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	0.5		0.5		Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	1,527,185.61
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	1,527,185.61

Fill in this information to identify your case:							
Debtor 1	Balasubramaniam Jayaram Harid						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF NEW YORK				
Case number	18-13632						
(if known)							

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	BMW Financial Services P.O. Box 3608 Dublin, OH 43016	Vehicle lease of Mini countryman 2018 automobile
2.2	Toyota Motor Credit Co Toyota Financial Services Po Box 8026 Cedar Rapids, IA 52408	Vehicle lease of Lexus RX350 automobile

	rmation to identify your	Case.			
Debtor 1	Balasubramania First Name	m Jayaram Harid	LastNama		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	SOUTHERN DISTRICT	OF NEW YORK		
Case number	18-13632				
(if known)					Check if this is an
					amended filing
Official Fo	orm 106H				
Schedule	H: Your Cod	lebtors			12/15
Codebtors are r	people or entities who	are also liable for any deh	ts vou may have. Re a	as complete and accurate a	as possible. If two married
people are filing	g together, both are equ	ually responsible for supp	lying correct information	tion. If more space is need	ed, copy the Additional Page,
		e boxes on the left. Attacr ı). Answer every question		to this page. On the top of	any Additional Pages, write
1 Do you h	nave any codebtors? (If	f you are filing a joint case,	do not list either snouse	as a codebtor	
1. Do you i	iave any obacotors. (iii	you are ming a joint oace,	do not not officer opodoc	ous a codesion.	
■ No					
☐ Yes					
		u lived in a community pr a, Nevada, New Mexico, Pu		ry? (Community property sta	tes and territories include
Alizolia, Ca	illioitila, idalio, Louisialia	a, Nevada, New Mexico, Pu	erio Rico, Texas, Wasi	illigion, and wisconsin.)	
No. Go to					
☐ Yes. Did	your spouse, former spo	ouse, or legal equivalent live	e with you at the time?		
					th you. List the person show reditor on Schedule D (Officia
), Schedule E/F (Officia				edule E/F, or Schedule G to f
	·· 				
	nn 1: Your codebtor Number, Street, City, State and 2	ZIP Code		Column 2: The creditor Check all schedules th	or to whom you owe the debt
				Check an soriedates an	ат арргу.
3.1				Schedule D, line	
Name				☐ Schedule E/F, line ☐ Schedule G, line _	
				Schedule G, line _	
Numbe City	er Street	State	ZIP Code		
3.2				☐ Schedule D, line	
Name				☐ Schedule E/F, line	
				☐ Schedule G, line	

Street

State

Number

City

ZIP Code

Fill	in this information to identify your ca	ase:								
Del	otor 1 Balasubram	aniam Jayaram Haric	i							
	otor 2				_					
Uni	ted States Bankruptcy Court for the	SOUTHERN DISTRIC	CT OF NEW YORK		_					
-	se number		_			Chec	k if this is	:		
(If kr	nown)						n amende	J		
									g postpetition bllowing date:	
0	fficial Form 106I					M	M / DD/ Y	YYYY		
S	chedule I: Your Inc	ome								12/15
sup spo	es complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. On the plant of the p	are married and not filing w	ng jointly, and your ith you, do not incl	spouse i ude inforr	is livi natio	ng with n about	you, incl your sp	ude inforn ouse. If mo	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-fil	ling spouse	
	If you have more than one job,		■ Employed				☐ Empl	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not employed			
	employers.	Occupation	Consultant							
	Include part-time, seasonal, or self-employed work.	Employer's name	Total Nutrition	Global L	LC					
	Occupation may include student or homemaker, if it applies.	Employer's address	9 Rhondonolia Norwalk, CT 06							
		How long employed t	here? 3 mon	ths			_			
Par	t 2: Give Details About Mor	thly Income								
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to	report for	any li	ne, write	\$0 in the	space. Inc	clude your nor	n-filing
-	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	on for all e	emplo	yers for	that perso	on on the lir	nes below. If y	you need
						For Deb	otor 1		otor 2 or ng spouse	
2.	List monthly gross wages, salar deductions). If not paid monthly, or			2.	\$_	3,	00.00	\$	N/A	
3.	Estimate and list monthly overti	ime pay.		3.	+\$_		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	3,00	00.00	\$	N/A	

П

Yes. Explain:

Fill	in this information to identify yo	our case:						
Deb	Debtor 1 Balasubramaniam Jayaram Harid				Check if this is:			
					■ A	An amended filing		
	otor 2 ouse, if filing)						ving postpetition chapter the following date:	
Unit	United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK					MM / DD / YYYY		
Cas	se number 18-13632							
	nown)							
0	fficial Form 106J							
S	chedule J: Your	Exper	ises				12/15	
Be	as complete and accurate as ormation. If more space is ne mber (if known). Answer ever	possible eded, atta	. If two married people ar					
Par 1.	t 1: Describe Your House Is this a joint case?	hold						
	■ No. Go to line 2. □ Yes. Does Debtor 2 live	in a sepai	ate household?					
	□ No		ial Form 106J-2, <i>Expenses</i>	for Separate House	e <i>hold</i> of Debto	or 2.		
2.	Do you have dependents?	■ No						
	Do not list Debtor 1 and Debtor 2.	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?	
	Do not state the dependents names.						□ No □ Yes	
	•						□ No	
							☐ Yes	
							□ No	
							☐ Yes	
							□ No □ Yes	
3.	Do your expenses include		No				□ res	
	expenses of people other t yourself and your depende	han _—	Yes					
	t 2: Estimate Your Ongoi							
exp	timate your expenses as of your expenses as of a date after the lolicable date.	our bankr bankrupto	uptcy filing date unless y y is filed. If this is a supp	ou are using this f lemental <i>Schedule</i>	orm as a sup J, check the	pplement in a Cha e box at the top o	pter 13 case to report f the form and fill in the	
	lude expenses paid for with							
	ficial Form 106l.)					Your expo	enses	
4.	The rental or home owners payments and any rent for th			nclude first mortgag	e 4. \$		2,000.00	
	If not included in line 4:							
	4a. Real estate taxes				4a. \$		0.00	
	4b. Property, homeowner's	s, or rente	's insurance		4b. \$		0.00	
	4c. Home maintenance, re	•			4c. \$		0.00	
E	4d. Homeowner's associate			ma aquitules :	4d. \$		0.00	
5.	Additional mortgage payme	ents for y	our residence, such as ho	me equity loans	5. \$		0.00	

btor 1	Balasubramaniam Jayaram Harid	Case num	ber (if known)	18-13632
Utilitie	es:			
6a.	Electricity, heat, natural gas	6a.	\$	0.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
6d.	Other. Specify:	6d.		0.00
	and housekeeping supplies		\$	525.00
	care and children's education costs	8.		0.00
	ing, laundry, and dry cleaning	9.	·	100.00
	nal care products and services	10.		175.00
	al and dental expenses	11.	·	100.00
	portation. Include gas, maintenance, bus or train fare.			100.00
	t include car payments.	12.	\$	350.00
	tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	75.00
	table contributions and religious donations	14.	\$	0.00
Insura	•		·	0.00
	t include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	750.00
15c.	Vehicle insurance	15c.	\$	530.00
	Other insurance. Specify:	15d.	·	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		•	0.00
	y: Self employment income taxes (estimated)	16.	\$	1,000.00
	Iment or lease payments:	_	·	1,000.00
17a.	Car payments for Vehicle 1	17a.	\$	930.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
	Other Specify	17c.	·	0.00
	Other. Specify:	17d.	·	0.00
	payments of alimony, maintenance, and support that you did not report as		Ψ	0.00
	sted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	payments you make to support others who do not live with you.		\$	0.00
Specif	y:	19.		
Other	real property expenses not included in lines 4 or 5 of this form or on School	lule I: Yo	our Income.	
	Mortgages on other property	20a.		0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.	\$	0.00
	: Specify:	21.	· <u> </u>	0.00
Jule1.	. opcony.		· Ψ	0.00
	late your monthly expenses			
	dd lines 4 through 21.		\$	6,535.00
22b. C	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. A	dd line 22a and 22b. The result is your monthly expenses.		\$	6,535.00
			· —	-,000:00
	late your monthly net income.		•	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	•	7,000.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	6,535.00
00				
	Subtract your monthly expenses from your monthly income.	23c.	\$	465.00
	The result is your monthly net income.	230.	Ψ	403.00
For exa	u expect an increase or decrease in your expenses within the year after you ample, do you expect to finish paying for your car loan within the year or do you expect your ration to the terms of your mortgage?			ase or decrease because of a
■ No.				
☐ Yes				

Fill in this information to identify your case:						
Debtor 1	Balasubramaniam Jayaram Harid					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		SOUTHERN DISTRICT OF NEW YORK				
Case number	18-13632					

■ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below	
D	id you pay or agree to pay someone who is NOT an atte	orney to help you fill out bankruptcy forms?
	No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	nder penalty of perjury, I declare that I have read the sure at they are true and correct. /s/ Balasubramaniam Jayaram Harid Balasubramaniam Jayaram Harid Signature of Debtor 1	mmary and schedules filed with this declaration and X Signature of Debtor 2
	Date December 5, 2018	Date